

|                             |                         |                 |                                |                                   |
|-----------------------------|-------------------------|-----------------|--------------------------------|-----------------------------------|
| SERIAL NUMBER<br>09/356,148 | FILING DATE<br>07/19/99 | CLASS<br>711701 | GROUP ART UNIT<br>8751<br>2453 | ATTORNEY DOCKET NO.<br>G0008/7004 |
|-----------------------------|-------------------------|-----------------|--------------------------------|-----------------------------------|

APPLICANT

JACK E. OZZIE, CHESTER, NH; RAYMOND E. OZZIE, MANCHESTER, MA.

\*\*CONTINUING DOMESTIC DATA\*\*\*\*\*

VERIFIED

Ac

\*\*371 (NAT'L STAGE) DATA\*\*\*\*\*

VERIFIED

Ac

\*\*FOREIGN APPLICATIONS\*\*\*\*\*

VERIFIED

Ac

IF REQUIRED, FOREIGN FILING LICENSE GRANTED 08/10/99 \*\* SMALL ENTITY \*\*

|   |   |                        |                      |                    |                         |
|---|---|------------------------|----------------------|--------------------|-------------------------|
| Foreign Priority claimed<br>35 USC 119 (a-d) conditions met | <input type="checkbox"/> yes <input checked="" type="checkbox"/> no<br><input type="checkbox"/> yes <input checked="" type="checkbox"/> no <input type="checkbox"/> Met after Allowance | STATE OR COUNTRY<br>NH | SHEETS DRAWING<br>13 | TOTAL CLAIMS<br>34 | INDEPENDENT CLAIMS<br>8 |
| Verified and Acknowledged<br>Examiner's Initials            | <u>Ac</u>   |                        |                      |                    |                         |

ADDRESS

SEE CUSTOMER NUMBER: 021127

TITLE

METHOD AND APPARATUS FOR PRIORITIZING DATA CHANGE REQUESTS AND  
MAINTAINING DATA CONSISTENCY IN A DISTRIBUTED COMPUTER SYSTEM  
EQUIPPED FOR ACTIVITY-BASED COLLABORATION

|                              |   |   |
|------------------------------|---|---|
| FILING FEE RECEIVED<br>\$701 | FEES: Authority has been given in Paper<br>No. _____ to charge/credit DEPOSIT ACCOUNT<br>NO. _____ for the following: | <input type="checkbox"/> All Fees<br><input type="checkbox"/> 1.16 Fees (Filing)<br><input type="checkbox"/> 1.17 Fees (Processing Ext. of time)<br><input type="checkbox"/> 1.18 Fees (Issue)<br><input type="checkbox"/> Other _____<br><input type="checkbox"/> Credit |
|------------------------------|---|---|